



Application for Employment

NOTICE: Applicant should read carefully before completing application. Please print or type all information (use black or blue ink). Applicant must complete all four (4) pages. Incomplete applications will not be considered. You may fill this out on line and directly send it to the above address or you may send this file as an attachment and email it to karla.bowman@mohicannorthstar.com. Thank you for your interest.

Full Name (first, middle, last) _____

Current Mailing Address _____

Current Telephone Number _____ Social Security No. (optional) _____

U.S. Citizen Yes No Date of Birth (optional) _____ (must be 18 years old)

Are you a veteran? Yes No If yes, what branch of service? _____

Position(s) Applying For - Please Be Specific: _____

Salary Desired Hourly Annually Date available to start _____

Please indicate which types of employment you are applying for (check more than one if you wish):

Full Time	Part Time	Temporary	Days Only	Nights Only	Days/Nights
-----------	-----------	-----------	-----------	-------------	-------------

Are you willing to take a physical examination, health or tuberculosis screening at our expense? Yes No

Do you have any impairment (physical, mental, medical) that would interfere with your ability to perform all the duties of the job that you are applying for? Yes No If yes, please describe impairment and explain work limitations. _____

Are you currently employed? Yes No If yes, may we contact your current employer? Yes No

List professional, business or civic activities and offices held. _____

How did you hear about us? Community Posting Newspaper Employee Other_

If one of our employees encouraged you to apply, please provide name. _____

FOR HUMAN RESOURCE OFFICE USE ONLY			
Date CIB Completed: _____			
CIB Eligibility:	No Record	Eligible	
Pending	Not Eligible	Permanent Bar	Date Received: _____

EDUCATION AND TRAINING SECTION

Do you have a High School Diploma or GED? Yes No Year of Graduation

Name and Location of High School

List any training beyond high school (college/university/vocational/specialized).

Name and Location of School

Years Attended

Degree Earned

Course of Study

EMPLOYMENT HISTORY

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comment section below. All applications for technical, supervisory and managerial positions must include a resume.

Employer

Address

Telephone Number

- -

Dates Employed

Job Title

Starting Rate of Pay

Final Rate of Pay

Supervisor

Reason for Leaving

Job Duties

Employer

Address

Telephone Number

- -

Dates Employed

Job Title

Starting Rate of Pay

Final Rate of Pay

Supervisor

Reason for Leaving

Job Duties

Employer

Address

Telephone Number

- -

Dates Employed

Job Title

Starting Rate of Pay

Final Rate of Pay

Supervisor

Reason for Leaving

Job Duties

Employer

Address

Telephone Number

- -

Dates Employed

Job Title

Starting Rate of Pay

Final Rate of Pay

Supervisor

Reason for Leaving

Job Duties

Describe any special skills and qualifications that may qualify you to work for Mohican North Star Casino and Bingo.

Comments

BACKGROUND INFORMATION SECTION

In accordance with Section IV G Mohican Gaming Enterprise, Personnel Policies and Procedures, the following criteria must be met to be eligible as an employee of Mohican North Star Casino and Bingo.

All current employees and new applicants who seek employment with Mohican North Star Casino and Bingo shall not have been convicted or entered a plea of guilty or no contest to any offense that may result in a bar to obtaining or retaining a gaming license, or any other activity that would injure or pose a threat to the public interest, the integrity of the gaming facility or the effective regulation thereof, or enhance the dangers of unfair, unsuitable or illegal gaming practices.

To ensure that these criteria are evaluated before appointments are made, all applicants must complete this application and agree to a background check. Any information contained on the application is strictly confidential, except that it is subject to the Privacy Notice, as printed in this application.

Full Name (first, middle, last)

Current Mailing Address

Current Telephone Number

Social Security No.

Previous Names Used

Date of Birth

Place of Birth

Sex: Male Female

Race: Indian White Black Hispanic Asian Other U.S. Citizen Yes No

Have you ever been convicted of a felony, misdemeanor or ordinance violation? Yes No If yes, please explain.

Do you have pending court charges for a felony, misdemeanor or ordinance violation? Yes No If yes, explain.

Applicant Signature

Date

DRUG TESTING ACKNOWLEDGEMENT

I understand that Mohican North Star Casino and Bingo has a commitment to maintain a drug-free workplace and requires a drug screening as a part of its selection and hiring process. I understand that such drug screening will consist of the testing of a urine sample or other medically recognized test designed to detect traceable amounts of a controlled substance in my body. If after a confirmed test, it is determined my specimen contains a controlled substance or was adulterated or substituted, I will be disqualified from consideration for employment and any offer of employment will be withdrawn. I further understand that if I am employed, I may be randomly selected for screening and under certain circumstances, may be required to submit to testing for reasonable suspicion, accident or unsafe practices or follow-up. I understand that a confirmed positive result of that testing or refusal to submit to testing may result in disciplinary action, including dismissal from employment. I have read, understand and agree to this statement.

Applicant Signature

Date

TRIBAL PREFERENCE INFORMATION

**THE FOLLOWING INFORMATION IS SOLICITED IN ORDER TO MEET THE REQUIREMENTS
OF THE MOHICAN NATION EMPLOYMENT PREFERENCE ORDINANCE**

1. Are you an enrolled member of the Stockbridge-Munsee Tribe? Yes No

If yes, what is your enrollment number?

2. If not an enrolled member, are you a direct descendant of the Stockbridge-Munsee Tribe? Yes No

If yes, what is the name and enrollment number of your biological parent?

3. Are you a legal spouse of an enrolled member of the Stockbridge-Munsee Tribe? Yes No

If yes, what is the name and enrollment number of your spouse?

FOR HUMAN RESOURCE OFFICE USE ONLY

(Mohican North Star Casino and Bingo needs to see and verify your enrollment, please provide your card)

Verified By: Date

Document or Source:

PRIVACY NOTICE

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 25 USC 2701 ET seq. The purpose of the requested information is to determine the eligibility of individuals to be employed in a gaming operation. The information will be used by National Indian Gaming Commission members and staff who have need for the information in the performance of their official duties. The information may be disclosed to appropriate federal, tribal, state, local or foreign law enforcement and regulatory agencies when relevant to civil, criminal or regulatory investigations or prosecutions. The information may be disclosed when pursuant to a requirement by a tribe or the National Indian Gaming commission in connection with the hiring or firing of an employee, the issuance or revocation of a gaming license or investigations of activities while associated with a tribe or a gaming operation. Failure to consent to the disclosures indicated in this notice will result in Mohican North Star Casino and Bingo being unable to hire you in a primary management official or key employee position. The disclosure of your social security number is voluntary, however failure to supply this information may result in errors processing your application.

NOTICE REGARDING FALSE STATEMENTS

A false or dishonest answer to any question on this application will be grounds for rating an applicant ineligible for employment with Mohican North Star Casino and Bingo or for dismissal after employment. All statements on this application are subject to inquiry.

NON-DISCLOSURE NOTICE

I agree not to divulge any records, customer lists, methods, practices or procedures with which Mohican North Star Casino and Bingo conducts its business, as this is propriety information that is protected as trade secrets. I agree that all such matters and information shall be kept strictly confidential at all times during my employment and thereafter.

CONSENT TO RELEASE INFORMATION

I hereby authorize all parties named in this application to disclose to Mohican North Star Casino and Bingo Human Resource Office any information necessary to determine eligibility for employment, including information regarding my service, character and conduct. I hereby release the parties from all liability that may arise from furnishing such information. This authorization is good for six months from the date signed.

Applicant Signature

Date